

CMHC Policy Review Distribution for **JULY**

These policies will be reviewed at the July meetings.	
Referral of Offenders to the Development Disabilities Program (DDP)	A-08.3
Offender Medical and Mental Health Classification	A-08.4
Guidelines for Completing the Health Summary for Classification Form	A-08.4 Attachment A
Coordination with Windham School System	A-08.5
Medically Recommended Intensive Supervision Screening	A-08.6
MRIS Medical Summary	A-08.6 Attachment A
MRIS – Standard Operating Procedure for Completing Medical Summary	A-08.6 Attachment B
PULHES System of Offender Medical and Mental Health Classification	A-08.7
(A) PULHES	A-08.7 Attachment A
(B) Guidelines for Coding PUHLES	Attachment B
Medical Pass	A-08.8
Offender Workers	
Offender Workers	C-22.1
Position Descriptions	C-23.1
Equipment, Supplies and Inventory	
Equipment, Supplies and Inventory	D-28.5
Access to Diagnostic Services	D-29.1
Management of Offenders Who Have Received Solid Organ Transplants	
Management of Offenders Who Have Received Solid Organ Transplants	E-31.4
Dental Utilization/Quality Review Committee	E-36.5
Periodontal Disease Program	E-36.6
Cosmetic Surgery	E-37.6
Health Evaluation and Documentation – Offenders in Segregation	E-39.1
Direct Medical Orders	E-40.1
Emergency Services	E-41.1
Emergency Response During Hours of Operation	E-41.2
Inventory List	E-41.2 Attachment A
Offender Transport and Transfer	E-42.1
Personal Hygiene	
Personal Hygiene	F-49.1
Treatment of Offenders with Gender Disorders	
Treatment of Offenders with Gender Disorders	G-51.11
Consent Form for Therapy with Male Hormones	G-51.11 Attachment A-1
Consent Form for Therapy with Female Hormones	G-51.11 Attachment A-2
Special Needs Offenders Releasing From TDCJ	G-51.12
Continuity of Care Information Form	G-51.12 Attachment A
Infirmary Care	G-52.1
Suicide Prevention Plan	G-53.1
Management of Offenders Hunger-Strikes	G-53.3
Detoxification	G-54.1
Health Services Forms Control and Design	
Health Services Forms Control and Design	H-60.3
Confidentiality and Release of Information	H-61.1
Affidavit of Personal Representative	H-61.1 Attachment A
Calculation of Costs for Patient Health Information (2/2005) Facilities	H-61.1 Attachment B
Calculation of Costs for Patient Health Information (2/2005) Health Services Archives	H-61.1 Attachment C
Informed Consent	
Informed Consent	I-70.1
Request/Consent For Treatment or Services	I-70.1 Attachment A
Offender's Right to Refuse Treatment, Department's Right to Compel Treatment	I-71.1
Request for Compelled Treatment	I-71.1 Attachment A
Refusal of Treatment or Services	I-71.1 Attachment B
Instructions For Completing The Refusal Of Treatment Form	I-71.1 Attachment C